



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+N00101689172

ENRBAR
200 ST NICHOLAS STREET
SOUTH PLAINFIELD NJ 07080

INSTALLATION ADDRESS

ST.
200 SAINT NICHOLAS STREET
SOUTH PLAINFIELD NJ 07080

EPA Form 8700-12B (4-80)

07/19/89



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
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EPA I.D. NUMBER

+N00101689172

ENRBAR
200 ST NICHOLAS STREET
SOUTH PLAINFIELD NJ 07080

INSTALLATION ADDRESS

200 ST NICHOLAS STREET
SOUTH PLAINFIELD NJ 07080

EPA Form 8700-12B (4-80)

07/25/89



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

03/21/94

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJD101689172

FACILITY NAME -> CONTI CONSTRUCTION CO INC

MAILING ADDRESS -> 200 ST NICHOLAS AVE
SOUTH PLAINFIELD, NJ 07080

INSTALLATION ADDRESS -> 200 ST NICHOLAS AVE
SOUTH PLAINFIELD, NJ 07080

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: CONTI, JERRY
EQUIP MGR
CONTI CONSTRUCTION CO INC
3001 S CLINTON AVE
SOUTH PLAINFIELD, NJ 07080



U.S. EPA
AGENCY RO II

94 MAR -4 AM 9:51

HAZARDOUS & SOLID WASTE
PROGRAMS BRANCH

March 2, 1994

USEPA REGION II
Air & Waste Management Division
26 Federal Plaza, Room 505
New York, N.Y. 10278

Attn: RCRA Notification
Mr. J. Hoyt

Dear Mr. Hoyt:

As per your recent conversation with Mr. Robert Scerbo of this office, this letter is to confirm that Conti Construction Company, Inc. will be the only generator of hazardous waste at the facility located at 200 St. Nicholas Avenue, South Plainfield, N.J. You indicated that your records identified Ehrbar, Inc. as the operator of the facility. Ehrbar was the previous owner/operator of the property. The property was sold by Ehrbar to K&K Land Enterprises, L.P. and will be operated by Conti Construction Company, Inc. All previous operators have vacated the property.

I trust that this information is satisfactory to support the issuance of a RCRA generator ID number to Conti Construction at this location. If additional information or clarification is necessary, please contact Mr. Scerbo at (908) 561-7600.

Very truly yours,
CONTI CONSTRUCTION COMPANY, INC.

A handwritten signature in dark ink, appearing to read "John V. Czapor".

John V. Czapor
Director of Environmental Services

3/7/94

Bob Scerbo is sending
in a signed copy of
the file —
Jace Hays

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



EPA

 Fed X
United States Environmental Protection Agency

Notification of Regulated Waste Activity

 Date Received
(For Official Use Only)

MAR 08 1994

HAZARDOUS & SOLID WASTE PROGRAMS BRANCH

MID

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification


 B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

NJDLDJ689L72

II. Name of Installation (Include company and specific site name)

CONTI CONSTRUCTION CO INC

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

200 ST. NICHOLAS AVE

Street (continued)

City or Town

SOUTH PLAINFIELD

State

ZIP Code

NJ 07080-

County Code

County Name

MIDDLESEX

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

SAME

City or Town

SAME

State

ZIP Code

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

CONTI

(first)

JERRY

Job Title

EQUIPMENT MANAGER

Phone Number (area code and number)

908-561-7600

VI. Installation Contact Address (See Instructions)

 A. Contact Address
Location Mailing

B. Street or P.O. Box



3001 SOUTH CLINTON AVE

City or Town

SOUTH PLAINFIELD

State

ZIP Code

NJ 07080-

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

K & K LAND ENTERPRISES LP

Street, P.O. Box, or Route Number

3001 S. CLINTON AVE

City or Town

SOUTH PLAINFIELD

State

ZIP Code

NJ 07080-

Phone Number (area code and number)

908-561-7600

B. Land Type

P

C. Owner Type

P

 D. Change of Owner
Indicator

Yes

No

 (Date Changed)
Month Day Year

Change Curves

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity		B. Used Oil Fuel Activities	
1. Generator (See instructions)	3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.	1. Off-Specification Used Oil Fuel	
<input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.)	4. Hazardous Waste Fuel	<input type="checkbox"/> a. Generator Marketing to Burner	
<input checked="" type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.)	<input type="checkbox"/> a. Generator Marketing to Burner	<input type="checkbox"/> b. Other Marketer	
<input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)	<input type="checkbox"/> b. Other Marketers	<input type="checkbox"/> c. Burner - Indicate device(s) - Type of Combustion Device	
2. Transporter (Indicate Mode in boxes 1-5 below)	<input type="checkbox"/> c. Boiler and/or Industrial Furnace	<input type="checkbox"/> 1. Utility Boiler	
<input type="checkbox"/> a. For own waste only	<input type="checkbox"/> 1. Smelter Deterioration	<input type="checkbox"/> 2. Industrial Boiler	
<input type="checkbox"/> b. For commercial purposes	<input type="checkbox"/> 2. Small Quantity Exemption	<input type="checkbox"/> 3. Industrial Furnace	
Mode of Transportation	Indicate Type of Combustion Device(s)		
<input type="checkbox"/> 1. Air	<input type="checkbox"/> 1. Utility Boiler		
<input type="checkbox"/> 2. Rail	<input type="checkbox"/> 2. Industrial Boiler		
<input type="checkbox"/> 3. Highway	<input type="checkbox"/> 3. Industrial Furnace		
<input type="checkbox"/> 4. Water			
<input type="checkbox"/> 5. Other - specify	<input type="checkbox"/> 5. Underground Injection Control		

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic (D000)	(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	D008 D039

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1 F001	2 F003	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.)

1	2	3	4	5	6
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X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature <i>Robert A. Scerbo</i>	Name and Official Title (type or print) ROBERT A. SCERBO ENV. SCIENTIST	Date Signed 2/7/94
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XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

U.S. EPA
AGENCY RO II

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

HAZARDOUS & SOLID WASTE
PROGRAMS BRANCH

II. Name of Installation (Include company and specific site name)

CONTI CONSTRUCTION CO INC.

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

200 ST. NICHOLAS AVE

Street (continued)

City or Town

State

ZIP Code

SOUTH PLAINFIELD

NJ

07080-

County Code

County Name

MIDDLESEX

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

SAME

City or Town

State

ZIP Code

SAME

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

(first)

CONTI

JERRY

Job Title

Phone Number (area code and number)

EQUIPMENT MANAGER 908-561-7600

VI. Installation Contact Address (See Instructions)

A. Contact Address
Location Mailing

B. Street or P.O. Box

☐ ☒

3001 SOUTH CLINTON AVE

City or Town

State

ZIP Code

SOUTH PLAINFIELD

NJ

07080-

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

K & K LAND ENTERPRISES LP

Street, P.O. Box, or Route Number

3001 S. CLINTON AVE

City or Town

State

ZIP Code

SOUTH PLAINFIELD

NJ

07080-

Phone Number (area code and number)

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed)

Month Day Year

908-561-7600

P

P

Yes

No

1D - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity		B. Used Oil Fuel Activities
1. Generator (See instructions)	3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.	1. Off-Specification Used Oil Fuel
<input type="checkbox"/> a. Greater than 1000 kg/mo (2,200 lbs.)	<input type="checkbox"/> 4. Hazardous Waste Fuel	<input type="checkbox"/> a. Generator Marketing to Burner
<input checked="" type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.)	<input type="checkbox"/> a. Generator Marketing to Burner	<input type="checkbox"/> b. Other Marketer
<input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)	<input type="checkbox"/> b. Other Marketers	<input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device
2. Transporter (Indicate Mode in boxes 1-5 below)	<input type="checkbox"/> c. Boiler and/or Industrial Furnace	<input type="checkbox"/> 1. Utility Boiler
<input type="checkbox"/> a. For own waste only	<input type="checkbox"/> 1. Smelter Refractor	<input type="checkbox"/> 2. Industrial Boiler
<input type="checkbox"/> b. For commercial purposes	<input type="checkbox"/> 2. Small Quantity Exemption	<input type="checkbox"/> 3. Industrial Furnace
Mode of Transportation	Indicate Type of Combustion Device(s)	<input type="checkbox"/> 2. Specification Used Oil Fuel Marketer for On-site Burner; Who First Claims the Oil Meets the Specification
<input type="checkbox"/> 1. Air	<input type="checkbox"/> 1. Utility Boiler	
<input type="checkbox"/> 2. Rail	<input type="checkbox"/> 2. Industrial Boiler	
<input type="checkbox"/> 3. Highway	<input type="checkbox"/> 3. Industrial Furnace	
<input type="checkbox"/> 4. Water		
<input type="checkbox"/> 5. Other - specify	<input type="checkbox"/> 5. Underground Injection Control	

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. Toxicity Characteristic (D000) ☐

(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

D008 D039

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1 F001	2 F003	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.)

1	2	3	4	5	6
---	---	---	---	---	---

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature <i>[Signature]</i>	Name and Official Title (type or print) ENVIRONMENTAL SCIENTIST	Date Signed 2/8/94
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XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)


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*****
RCRIS: Notification View Screen 2 of 6
*****
(EPA Id: NJD101689172      Other Id:      Merge Send: Y
(Date Received(MMDDYY):    062788      Source( N/E/S ):  N Non-Notifier Flag:
(Date Acknowledged (MMDDYY): 07251988      Send Acknowledgement:
(Name of Installation: EHRBAR
      Installation Location Address
(Streets: 200 ST NICHOLAS STREET
(City:      SOUTH PLAINFIELD      State: NJ      Zip:      07080
(County Code: 023      County Name: MIDDLESEX
      Installation Mailing Address
(Streets: 200 ST NICHOLAS STREET
(City:      SOUTH PLAINFIELD      State: NJ      Zip:      07080
      Contact Information
(      Last Name      First Name      Title      Phone      Address(N,L,C)
( PHILLIPSHECK      MIKE      2125551212      L
(Streets: 200 ST NICHOLAS STREET
(City:      SOUTH PLAINFIELD      State: NJ      Zip:      07080
(Land Type:
*****
Enter-Continue      F1-Previous Screen      F3-Exit
*****
```

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*****
RCRIS: Notification View Screen 3 of 6
*****
(EPA Id:      NJD101689172      Other Id:      Source: N
      Owner Sequence Number:      1
(Ownership: EDWARD EHRBAR      Type of Owner: F
      Address of Owner/Operator
      Street: NOT REQUIRED
      City:      NOT REQUIRED      State: WY Zip Code      99999
      Phone: 2125551212
      Current/Previous Indicator: 00      Change Date(MMDDYY):
*****
*****
Enter-Continue      F1-Previous Screen      F3-Exit      F5-Curr. Owner
F6-Prev. Owner      F8-Help      F9-First      F10-Next
*****
```



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*****
RCRIS: Notification View Screen 4A of 6
*****
EPA Id: NJD101689172   Other Id:   Source: N
*****
Waste      Type      RCRA Reg   RCRA Reg   State Reg   State Reg
Activity:   Status      Desc      Status      Desc
*****
HW Generator      2      R
HW TSD
HW Transporter
Mode of
Transportation:   Air      Rail      Highway      Water
                  Other
*****
HW Burner/Blender
NHW Used Oil Recycler
*****
Underground Injection Control:
Recycler:
*****
*****
Enter-Continue      F1-Previous Screen      F3-Exit      F9-Help
*****
*****

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*****
RCRIS: Notification View Screen 5 of 6
*****
EPA Id: NJD101689172   Other Id:   Source: N
*****
Hazardous Waste Codes: Specific/Non-Specific/Commercial/Chemical
DO01
*****
*****
Enter-Continue      F1-Previous Screen      F3-Exit
F9-First      F10-Next
*****
*****

```